

PD4000117710

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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2004 DEC 29 PM 1:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

officer Resignation
LFS
1-6-05

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: It All Works, Inc.
(Name of Corporation)

DOCUMENT NUMBER: P04000117710

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Peter McFadden
(Name of Person)

It All Works, Inc
(Name of Firm/Company)

730 Venetian Way
(Address)

Merritt Island, FL 32953
(City/State and Zip Code)

For further information concerning this matter, please call:

Peter McFadden at (321) 452-2053
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION

FILED

2004 DEC 29 PM 1:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, Peter McFadden, hereby resign as Treasurer
(Title)

of It All Works, Inc.
(Name of Corporation)

P04000117710, a corporation organized under the laws of the State of
(Document Number, if known)

Florida

Peter McFadden
(Signature of resigning officer/director)

I will no longer be serving as Treasurer and
will ~~only~~ only be an investor in + 25% owner
of It All Works Inc.

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314